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CONFIRMATION NO. 1664

SERIAL NUMBER 10/630,587	FILING DATE 07/29/2003 RULE	CLASS 424	GROUP ART UNIT 1653	ATTORNEY DOCKET NO. 17328CON5
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APPLICANTS

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** CONTINUING DATA **

This application is a CON of 10/199,222 07/18/2002 PAT 6,869,610
which is a CON of 09/550,371 04/14/2000 PAT 6,464,986 *CHK*

** FOREIGN APPLICATIONS **

none CHK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/04/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>CHK</i>	Initials <i>CHK</i>		

ADDRESS

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TITLE

post-operative pain treatment by peripheral administration of
~~Neuralgia pain treatment by peripheral administration of a neurotoxin~~ *a Neurotoxin*

FILING FEE

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